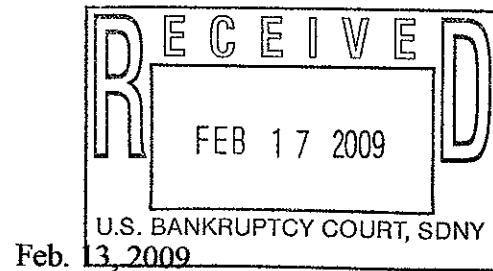


United States Bankruptcy Court  
Southern District of New York  
One Bowling Green Station  
Attn. Judge Robert D. Drain  
New York, New York 10004



Dear Judge Robert D. Drain

Delphi Corp. Case#05-44481 filed Oct. 5, 2008  
Document #14705 to cancel OPEB (health insurance benefits) for all salaried retirees

I had previously sent a similar letter on Feb. 9, 2009 to the attention of Judge Green, I'm unsure who the correct Judge is that is hearing this case so I'm following up with this letter to you.

I'm writing in regards to Delphi's eliminating any medical benefits for salaried retirees per a notice I just received Feb. 5, 2009. I'd like to introduce myself; my name is David Paulick, age 70. I had worked for General Motors for 43 years, 1956 – 1999, at which time I was consumed by the new Delphi Corp. At that time I was informed all the benefits and retirement would be the same as GM. After my wife's severe accident in Aug. '99 I decided to retire starting in Oct. '99 after my severance payout, my actual retirement date was Sept. 1, 2000.

Contrary to what I was told, benefits started to change in Jan. '07 when Delphi went to a Health Reimbursement Account, while GM retirees maintained status quo. For my wife and I that was an account of \$20,000 to be used over the rest of our life for medical premiums. Now I understand that will be eliminated. Nowhere in the information given at the time was the usual disclaimer in regard to "this could change at any time". (see attached) There forth I planned accordingly on how much I will be paying and how to stretch the account for my wife and myself. In addition they want to eliminate my life insurance policy and the Medicare supplement. Also, I believe if the 15,000 salaried retirees were polled on whether they had seen or were told by Delphi the stated claim of legalese in regard to changing or eliminating at their desecration, very few would say they saw or were told of this disclaimer. It is one thing to change the plan for active employees who still have options on how to cover such changes, but to eliminate the benefits on retirees who are on fixed incomes with no options or time to recoup for such a change at the time of their greatest need is unacceptable.

After 44 years with GM and Delphi as a salaried employee I believe; (1) it is totally ill responsible, unethical and in bad faith to eliminate all medical benefits for the US salaried retirees in an attempt to resurrect the entire Delphi Corp. (2) Delphi was aware of their legacy with retirees when they negotiated with GM for money to cover such a

legacy. It should have been covered then.(3) GM is suffering the same economic issues, if not more so, and they are still funding their retirees medical, (4) if they can pay hourly employees \$100,000 to \$140,000 as a buy out to retire, surely they can pay the medical benefits as currently stated to 15,000 salaried retirees. I suspect these buy outs contributed more to their billion dollar attrition programs than the expenses of the salaried retirees.

Having received notice of this motion on Feb. 5, 2009 and requiring any objections to be filed by Feb. 17, 2009 with a decision by you on Feb. 24, 2009 seems to be an attempt by Delphi to ram this thru without due deliberation. Hopefully you will receive my objections in time, give them just deliberation and reject Delphi's motion.

Sincerely,



David R. Paulick

2408 Burning Tree Dr.

Kettering, Ohio 45440

(937)-299-2310

**ATTACHMENT**

Please note that any coverage you choose is on a voluntary basis and at your expense. You may want to compare the coverage offered by the AARP plans to others on the market. Several providers offer both supplemental "Medigap" plans and approved prescription drug plans. It is completely your decision.

**Retiree Health Reimbursement Account (HRA)**

Once you are eligible for Medicare, you are automatically enrolled in a Retiree Health Reimbursement Account (HRA) in the amount of \$10,000 (\$20,000 if you retired on or before March 1, 2005). An HRA is an employer-funded account that reimburses you for certain defined health care costs. The account will not grow through interest or future contributions from either you or Delphi, and the account cannot be converted to cash.

Your HRA will remain available until you have used the entire balance. For example, if you have a beginning account balance of \$10,000 and during 2007 you make claims and receive reimbursement for \$3,000, your balance at the beginning of 2008 will be \$7,000. How long the account will last will depend on how much you choose to spend each year.

**Surviving Spouse Coverage**

If you die before using the total amount in your HRA, your spouse may be eligible to use any remaining balance. How this works depends on when you die:

- If you die after you become Medicare-eligible in the normal course, your surviving spouse is eligible to receive the balance of your account. For example, if you die with a remaining HRA balance of \$2,000 and your spouse meets the eligibility requirements, your spouse will have an account set up in his or her name with a beginning balance of \$2,000.
- If you die before you become Medicare-eligible in the normal course, your surviving spouse can continue to participate in the U.S. Salaried Health Care program until your spouse reaches Medicare eligibility in the normal course. At that time, Delphi health care coverage stops and your surviving spouse is eligible to receive the balance of your HRA account.

Your HRA balance cannot be passed to someone you marry after your retirement, a dependent child, or other beneficiary. If you die without an eligible spouse then the remaining balance is forfeited.

**What Is Covered by the HRA**

The Retiree HRA is intended to assist you with the transition to Medicare coverage and is limited to the reimbursement of eligible health care "premiums" (sometimes called the "cost of coverage" or the "contributions"). These coverage costs could be for you or any eligible dependent as defined by the Internal Revenue Code of the United States.

Examples of medical insurance premiums that are eligible for reimbursement include:

- Medicare Part B and Part D (prescription drug plan) premiums.
- Medicare Advantage plan premiums.
- Medigap premiums – such as AARP supplemental coverage through United HealthCare.
- Dental, Vision, and Extended Care Coverage premiums, including the cost of continuing coverage through Delphi.